



Health Homes Washington

Update on Diabetes, Diabetes Self Care
Behaviors and Health Action Planning



November 13, 2014

Washington State
Health Care Authority



This presentation was provided as a Webinar for Health Home Care Coordinators which aired on November 13, 2014. This optional training was developed for Health Home Care Coordinators. It was developed and presented by Candace Goehring, MN RN, Office Chief for Integration Services and the Duals Integration Project in Washington State.



Purpose:

Introduce basic information about diabetes, the scope and impact of diabetes, and self care behaviors that can be included in Health Action Planning.



Learning Objectives

As a result of this training the participant will be able to describe, develop and/or demonstrate:

- Basic knowledge regarding diabetes.
- Scope and impacts of diabetes in Washington state.
- Basic evidence based best practices for management of diabetes.
- American Association of Diabetes Educators “7 Self-Care Behaviors”.
- Health Action Planning, Goal Setting and Action Steps for the “7 Self-Care Behaviors”.

Consistency in the bulleted items: not all end with periods. The period is not required if it is not a completed sentence.



Diabetes 101



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What is Diabetes?
What is pre-diabetes?

Slides 5 – 18 from the American Diabetes Association

What Happens When We Eat?

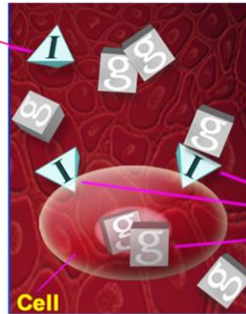


After eating, most food is turned into glucose,
the body's main source of energy.

Normal Blood Glucose Control

In people without diabetes,
glucose stays in a healthy range because

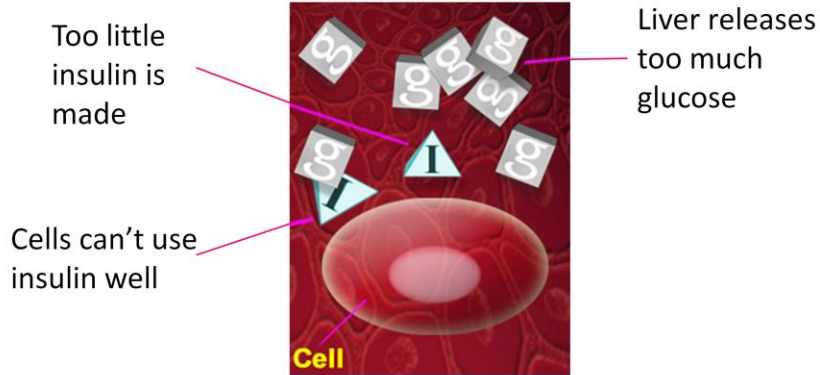
Insulin is
released at
the right
times and in
the right
amounts



Insulin helps
glucose enter
cells

High Blood Glucose (Hyperglycemia)

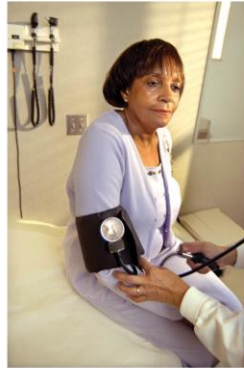
In diabetes, blood glucose builds up
for several possible reasons...



Hyperglycemia Can Cause Serious Long-Term Problems

Chronic complications of diabetes

- Blindness
- Kidney disease
- Nerve damage
- Amputation
- Heart attack
- Stroke



Two Main Types of Diabetes

Type 1 diabetes

Pancreas makes too little or no insulin

Type 2 diabetes

- Cells do not use insulin well (insulin resistance)
- Ability for pancreas to make insulin decreases over time

Type 1 Diabetes



- 1 in 20 people with diabetes have type 1
- Most people are under age 20 when diagnosed
- Body can no longer make insulin
- Insulin is always needed for treatment

Managing Type 1 Diabetes



- Blood glucose monitoring
- Education
- Healthy food choices
- Physical activity
- Insulin

Type 2 Diabetes

- Most people with diabetes have type 2
- Most people are over age 40 when diagnosed, but type 2 is becoming more common younger adults, children and teens
- Type 2 is more likely in people who:
 - Are overweight
 - Are non-Caucasian
 - Have a family history of type 2



Risk Factors for Type 2 Diabetes

- Being overweight
- Sedentary lifestyle
- Family history of diabetes
- History of gestational diabetes
- Age
- Ethnic/racial background:
 - African American
 - Hispanic/Latino
 - Native American
 - Asian American



Treatment for Type 2 Diabetes May Change Over a Lifetime



Always Includes:

- Education
- Healthy eating
- Blood glucose monitoring
- Physical Activity

May Include:

- Medications,
including insulin

What is Prediabetes?



- 1 in 3 American adults (79 million) have prediabetes
- Occurs before type 2 diabetes
- Blood glucose levels are higher than normal but not yet diabetes
- Most people with prediabetes don't know they have it

Is There Any Good News?

- Yes, we can reduce the chances of developing type 2 diabetes in high-risk people (weight loss, exercise, medications)
- Yes, we can reduce the chances of developing diabetes complications through:
 - Blood glucose control (diet, monitoring, medication)
 - Blood pressure control
 - Cholesterol control
 - Regular visits to healthcare providers
 - Early detection and treatment of complications

Preventive Efforts Are Key

- Most of the diabetes costs are due to end-stage complications
- Investment of resources into early diagnosis, patient education, prevention and treatments pays off in:
 - Longer lives
 - Increased productivity
 - Reduced costs over the long term



Steps to Lower Your Risk of Diabetes Complications

- A1C < 7
- Blood pressure < 140/80
- Cholesterol (LDL) < 100, statin therapy for high risk
- Get help to quit smoking
- Be active
- Make healthy food choices
- Take care of your feet
- Get recommended screenings and early treatment for complications



Washington Data



- Prevalence of diabetes with Health Home clients
- Demographic data and impacts

Diabetes prevalence in Health Home beneficiaries

- In SFY 2014, 33% of Medicaid clients eligible for Health Home services had Type I or II diabetes. Approximately 2,944 Medicaid clients with diabetes received health home care coordination services in that time period.

WA BRFSS data (2012)

- Self-reported data from the 2012 Behavioral Risk Factor Surveillance System (BRFSS) showed that an estimated 420,000 adults age 20 years and older (8.3 %) were told by a doctor they had any type of diabetes at some point.
- It is estimated using national prevalence rates that there are 4,600 youth with diabetes less than 20 years old in Washington.

Age and gender (BRFSS)

- The percent of adults reporting diabetes increases with age, up to 85 years old.
- A higher percent of men (23%) than women (17%) reported having diabetes from ages 65 to 84 years.

Race and Hispanic Origin

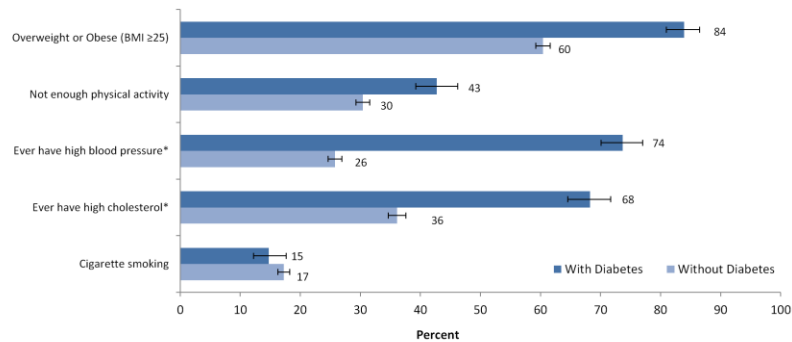
- White adults reported lower age-adjusted percent of diabetes (7%) than all other groups.
- The age-adjusted prevalence among American Indians and Alaska Natives (17%), followed by black (13%), Hispanic (12%) and Asian adults (10%) is consistent with national data.

Economic Factors and Education

- People of lower socioeconomic position are more likely to develop diabetes.
- Washington BRFSS showed the age-adjusted percent of adults who reported diabetes increased with decreasing income and decreasing levels of education.

Risk Factors

Risk Factors For Diabetes and Resulting Complications
Washington State BRFSS, 2012



*Data from 2011 survey, not asked in 2012. BMI=Body Mass Index (kg/m²)

Prediabetes

- Nationally, in 2009–2012, based on fasting glucose or A1C levels, 37% of U.S. adults aged 20 years or older had prediabetes (51% of those aged 65 years or older).
- Applying this percentage to the Washington State population in 2012 yields an estimated 1,873,070 adults age 20 years and older with prediabetes.
- People with prediabetes (A1C of 5.7-6.4) have a much greater chance of going on to develop diabetes than those with normal A1C levels (below 5.7)



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7 Self Care Behaviors



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American Association of Diabetes Educators
AADE 7 Self Care Behaviors

http://www.diabeteseducator.org/DiabetesEducation/PWD_Web_Pages/Learn_about_AADEs_Seven_Self-Care_Behaviors.html

Health Action Planning

- Health Home Care Coordinators can support their clients, families and caregivers with goal setting and action planning.
- The American Association of Diabetes Educators recommends seven behavior targets

The Goal Setting and Action Planning Worksheet

HEALTH HOME
Goal Setting and Action Planning Worksheet

Washington State Department of Social & Health Services
Behavioral Health and Service Integration Administration

Washington State Health Care Authority

Name: _____ Date: _____

Long Term Goal

Short Term Goal

Describe something you will do to improve your health:

Describe what you will do

1. What you'll do: _____

2. Where you'll do it: _____

3. The number of times each day / week: _____

4. How long will you commit to doing this: _____

Possible barriers to your success:

Plan to overcome the barriers:

Conviction

How important is it for you to work on the goal you identified above? Check the box which best shows your response.

Not at all convinced ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 Totally convinced

Confidence

How confident are you that you will be successful in reaching the goal you identified above? Check the box which best shows your response.

Not at all confident ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 Totally confident

Plan for followup:

HEALTH HOME: GOAL SETTING AND ACTION PLANNING WORKSHEET
DSHS 16-112 (REV. 06/2016)

Healthy Eating



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Goal: Healthy Eating

Action Steps

- ☐ Make Better Food Choices
- ☐ Reduce Portion Size
- ☐ Follow meal plan

A HEALTHY MEAL PLAN
SHOULD INCLUDE:

COMPLEX CARBOHYDRATES
whole grain bread, oatmeal,
potatoes, brown or wild rice

FIBER
beans, whole grains, fruits &
vegetables

PROTEIN
fish, chicken or turkey (without skin),
eggs or egg whites, Select or Choice
grades of beef trimmed of fat

LOTS OF VEGETABLES
especially the green, leafy ones

**LIMITED AMOUNTS OF
HEART-HEALTHY FATS**
olive, peanut or canola oil,
walnuts, almonds & flax seed

Healthy Eating

- Having diabetes does not mean you have to give up your favorite foods or stop eating in restaurants. In fact, there is nothing you can't eat.
- But you need to know that the foods you eat affect your blood sugar (also known as blood glucose).
- You should eat regular meals, think about the amount you eat and make food choices to help control your diabetes better and prevent other health problems.



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Being Active



BEING ACTIVE



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ACTIVO



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Goal: Being Active

Action Steps

- ☐ Exercise longer
- ☐ Exercise more often
- ☐ Follow exercise plan

SIMPLE WAYS TO BE MORE ACTIVE:

AT HOME

Walk your dog and play fetch
Work in your garden
Clean your house
Lift weights, march in place or walk around the room while watching TV



AT WORK

Walk at lunch
Exercise in your chair
Take the stairs
Stand while on the phone, reading or eating
Talk face-to-face with your coworkers



WHEN YOU'RE OUT

Go dancing
Do tai chi
Take a walk after dinner
Park far away from the door
Wear a pedometer



Being More Active

Lowers
blood
sugar

Lowers
cholesterol

Improves
blood
pressure

Lowers
stress and
anxiety

Improves
mood



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Monitoring



MONITORING



CONTROL

Goal: Monitoring

Action Steps

- ☐ Follow monitoring schedule
- ☐ Monitor more often
- ☐ Monitor Health Status

YOUR DIABETES EDUCATOR WILL HELP YOU LEARN:



- How to use the glucometer
- Tips for best/easiest way to monitor



- When to check your blood sugar
- What the numbers mean



- What to do if your numbers are off target



- How to record your results and keep track over time

Monitoring

- Monitoring is an important way to check your health and help you to make changes to feel better. And monitoring doesn't stop at measuring blood sugar levels. Because diabetes can affect your whole body, your healthcare providers should also regularly monitor your;
 - Heart health (blood pressure, weight and cholesterol level)
 - Kidney health (urine and blood testing)
 - Eye health (eye exams)
 - Foot health (foot exams and sensory testing)



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Taking Medications



TAKING MEDICATION



**TOMAR
MEDICAMENTOS**

Goal: Taking Medications

Action Steps

- ☐ Increase taking medications on time
- ☐ Miss fewer medications
- ☐ Take medications as prescribed
- ☐ Talk with my doctor about my medication questions



- ☐ Why am I taking these medications? _____
- ☐ What will they do for me? _____
- ☐ How should I fit them into my schedule? _____
- ☐ Will they cause side effects? _____
- ☐ If so, what should I do? _____

Taking Medications

- Medications you may need to take for your diabetes include:
 - Insulin, a hormone that helps your body use or store the food (carbs) you eat for energy.
 - Medications that help your body release or use insulin better.
 - Anti-hypertensives, which lower blood pressure
 - Statins, which lower cholesterol
 - Aspirin, which lowers your risk of heart attack
 - Vaccinations, including influenza and pneumonia, which help you stay healthy



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Problem Solving



Goal: Problem Solving

Action Steps

- ☐ Identify potential problems
- ☐ Plan for problems and potential barriers
- ☐ Prevent problem situations

THE DIABETES PROBLEM-SOLVING CYCLE:



Problem Solving/Learning

- **Don't beat yourself up** – Managing your diabetes doesn't mean being "perfect."
- **Analyze your day** – think about what was different:
 - Were you more stressed than usual?
 - Were you traveling?
 - Were you sick?
 - Did something change in your routine?
 - Were you more or less active than usual?
 - Did you eat more carbohydrates than usual?
 - Did you take more or less diabetes medication than usual?

Reducing Risks



REDUCING RISKS



REDUCCIÓN DE
RIESGOS



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Goal: Reducing Risks

Action Steps

- ☐ Stop smoking or reduce smoking
- ☐ Get routine health check ups
- ☐ Perform daily self care activities



Reducing Risks

- Taking control of your diabetes will help you head off the complications that can come with it.
- You can reduce your risk of heart attacks, stroke, damage to your kidneys and nerves, and loss of vision by keeping your blood sugar, cholesterol and blood pressure in check.



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Healthy Coping



HEALTHY COPING



AFRONTAMIENTO
SALUDABLE



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Goal: Healthy Coping

Action Steps

- ☐ Cope with diagnosis of disease
- ☐ Adapt to lifestyle changes
- ☐ Get support from family/friends



Healthy Coping

- Life is filled with stress. There's the daily kind (traffic!), and there are also more serious issues such as divorce or money problems. Add in the challenges of managing diabetes, and stress sometimes can feel overwhelming.
- It's important to find healthy ways to cope so you don't turn to harmful habits such as smoking, overeating, drinking alcohol or being less active.
- This is especially true if you have diabetes. Having a lot of stress can increase your blood sugar levels, make you feel more negative and may lead to bad decisions.



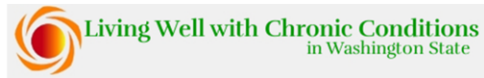
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Other Websites

- The YMCA's Diabetes Prevention Program:
 - <http://www.ymca.net/diabetes-prevention/>
- Living Well with Chronic Conditions in Washington State:
 - <http://livingwell.doh.wa.gov/webinars>



Questions for you

- How can you use this information for Goal Setting and Action Planning?
- Are there other diabetes related concerns we did not talk about today?
- What are the resources for diabetes education and support in your community?

Contact Information

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Topic: Chronic Conditions of Children
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Certificate of Completion

Update on Diabetes Self Care Behaviors and Health Action Planning

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Office Chief for Service Integration
Behavioral Health and Integration Services Administration - DSHS

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for Health Home Care Coordinators*

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